

CANDIDACY FOR COCHLEAR IMPLANTS

- Greater benefit for those with:
 - Shorter period of profound deafness
 - Memory of speech and language
- May not be suitable for those who:
 - Benefit substantially from hearing aids
 - Have been profoundly deaf for long time
 - Not well enough to undergo surgery or contraindications such as absence of cochlear structure
 - Inappropriate expectations from candidate or family
 - Lack support from family/caregivers
 - No available educational setting for supporting oral/auditory needs
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Currently, about 25,000 people worldwide have cochlear implants, with about 14,000 of those people living in the U.S. About half of the 14,000 are adults, half children. Who can benefit from a cochlear implant? One manufacturer of CIs points out that although it's not possible to predict how much benefit any individual will get, the following points are widely recognized: the shorter the time the person is profoundly deaf, the greater the benefit that is likely to be enjoyed; and if a person has memory of speech and language, they may benefit more from a cochlear implant (Understanding Cochlear Implants booklet, Med El, 2001). The Food and Drug Administration has approved cochlear implants for those as young as 12 months of age. A cochlear implant may not be suitable for the following people: those who can hear and understand much speech while using hearing aids; those people who have been profoundly deaf for a very long time, and whose auditory nerve has never been stimulated or hasn't been stimulated for a long time; those who are not well enough to undergo surgery; those people whose deafness is caused by problems in other parts of the ear, besides the cochlea (for example the auditory nerve is damaged or absent); those who have unrealistic expectations of the likely benefits; and those who lack support from family or caregivers, and are unlikely to follow-up with the rehab program that is critical to success.

Cochlear Implants: Evaluation Process for Infants and Young Children

- Extensive counseling and discussion of expectations
- Assurance of family commitment to intervention, education, maintenance of device, & follow-up programming sessions with audiologist
- Medical evaluation (MRI or CAT Scan)
- Genetic evaluation for connexin gene
- Developmental evaluation
- Communication evaluation (parental input and observation)
- Pre-implant auditory-verbal therapy required at some sites